

Attorney or Party without Attorney:

Michael B. Brown, Esq., SBN: 179222

STOEL RIVES LLP

500 CAPITOL MALL 1600

SACRAMENTO, CA 95814

TELEPHONE No.: (916) 447-0700

E-MAIL ADDRESS (Optional):

FAX No. (Optional):

Attorney for: Plaintiff Metropolitan Life Insurance Company

Ref No. or File No.:

FOR COURT USE ONLY

Insert name of Court, and Judicial District and Branch Court:

United States District Court, Eastern District of California - District Court

Plaintiff: Metropolitan Life Insurance Company

Defendant: Maricopa Orchards, LLC et al

PROOF OF SERVICE

HEARING DATE:

TIME:

DEPT.:

CASE NUMBER:

1:24-cv-01231-KES-SAB

AT THE TIME OF SERVICE I WAS AT LEAST 18 YEARS OF AGE AND NOT A PARTY TO THIS ACTION
I SERVED COPIES OF THE FOLLOWING DOCUMENTS:

Complaint and Exhibits; Corporate Disclosure Statement; Summons; Order Setting Mandatory Scheduling Conference; Notice Of Related Cases; Consent/Decline Of U.S. Magistrate Judge Jurisdiction; Clerk's Notice Reassigning Case; Minute Order; Notice Of Appearance By Robert Cullen Barton; Minute Order

PARTY SERVED: **Darius Assemi**

DATE & TIME OF DELIVERY: **10/25/2024
5:08 PM**

ADDRESS, CITY, AND STATE: **2559 W Lake Van Ness Cir
Fresno, CA 93711**

PHYSICAL DESCRIPTION: **Age: 60 Weight: 230 Hair: bald
Sex: Male Height: 5'9 Eyes:
Race: Armenian Marks:**

MANNER OF SERVICE:

Personal Service - By personally delivering copies.

Fee for Service: \$ 173.00

County: FRESNO

Registration No.: S20110000016

Eddings Attorney Support Services, Inc.

1099 East Champlain Dr., Suite A-102

Fresno, CA 93720

(559) 222-2274



I declare under penalty of perjury under the laws of the
The State of California that the foregoing information
contained in the return of service and statement of
service fees is true and correct and that this declaration
was executed on October 25, 2024.

Signature: _____

Brandon Allison

PROOF OF SERVICE